

Bureau of Health Care Quality and Compliance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: NVN4587HHA	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED 02/24/2011
NAME OF PROVIDER OR SUPPLIER BARTON HOME HEALTH AGENCY			STREET ADDRESS, CITY, STATE, ZIP CODE 1609 HIGHWAY 395 MINDEN, NV 89423		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE	
H 00	<p>INITIAL COMMENTS</p> <p>This Statement of Deficiencies was generated as a result of a State Relicensure Focused survey conducted in your facility on 2/22/11 - 2/24/11, in accordance with Nevada Administrative Code, Chapter 449, Home Health Agencies.</p> <p>The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state or local laws.</p> <p>Patient census at the time of survey was 40. Ten employee files were reviewed. Ten patient records were reviewed. Three patient interviews were conducted. One home visit was conducted.</p> <p>The following deficiencies were cited:</p>	H 00			
H152	<p>449.782 Personnel Policies</p> <p>A home health agency shall establish written policies concerning the qualification, responsibilities and conditions of employment for each type of personnel, including licensure if required by law. The written policies must be reviewed as needed and made available to the members of the staff and the advisory groups. The personnel policies must provide for:</p> <p>6. The maintenance of employee records which confirm that personnel policies are followed; This Regulation is not met as evidenced by: NRS 449.179 Initial and periodic investigations of criminal history of employee or independent contractor of certain agency or facility.</p> <p>1. Except as otherwise provided in subsection 2, within 10 days after hiring an</p>	H152			

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TITLE

(X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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H152	<p>Continued From page 1</p> <p>employee or entering into a contract with an independent contractor, the administrator of, or the person licensed to operate, an agency to provide personal care services in the home, an agency to provide nursing in the home, a facility for intermediate care, a facility for skilled nursing or a residential facility for groups shall:</p> <p>(a) Obtain a written statement from the employee or independent contractor stating whether he has been convicted of any crime listed in NRS 449.188 <http://www.leg.state.nv.us/NRS/NRS-449.html>;</p> <p>(b) Obtain an oral and written confirmation of the information contained in the written statement obtained pursuant to paragraph (a);</p> <p>(c) Obtain from the employee or independent contractor two sets of fingerprints and a written authorization to forward the fingerprints to the Central Repository for Nevada Records of Criminal History for submission to the Federal Bureau of Investigation for its report; and</p> <p>(d) Submit to the Central Repository for Nevada Records of Criminal History the fingerprints obtained pursuant to paragraph (c).</p> <p>2. The administrator of, or the person licensed to operate, an agency to provide personal care services in the home, an agency to provide nursing in the home, a facility for intermediate care, a facility for skilled nursing or a residential facility for groups is not required to obtain the information described in subsection 1 from an employee or independent contractor who provides proof that an investigation of his criminal history has been conducted by the Central Repository for Nevada Records of Criminal History within the immediately preceding 6 months and the investigation did not indicate that the employee or independent contractor had been convicted of any crime set forth in NRS 449.188</p>	H152			

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H152	<p>Continued From page 2</p> <p><http://www.leg.state.nv.us/NRS/NRS-449.html>.</p> <p>3. The administrator of, or the person licensed to operate, an agency to provide personal care services in the home, an agency to provide nursing in the home, a facility for intermediate care, a facility for skilled nursing or a residential facility for groups shall ensure that the criminal history of each employee or independent contractor who works at the agency or facility is investigated at least once every 5 years. The administrator or person shall:</p> <p>(a) If the agency or facility does not have the fingerprints of the employee or independent contractor on file, obtain two sets of fingerprints from the employee or independent contractor;</p> <p>(b) Obtain written authorization from the employee or independent contractor to forward the fingerprints on file or obtained pursuant to paragraph (a) to the Central Repository for Nevada Records of Criminal History for submission to the Federal Bureau of Investigation for its report; and</p> <p>(c) Submit the fingerprints to the Central Repository for Nevada Records of Criminal History.</p> <p>4. Upon receiving fingerprints submitted pursuant to this section, the Central Repository for Nevada Records of Criminal History shall determine whether the employee or independent contractor has been convicted of a crime listed in NRS 449.188</p> <p><http://www.leg.state.nv.us/NRS/NRS-449.html> and immediately inform the Health Division and the administrator of, or the person licensed to operate, the agency or facility at which the person works whether the employee or independent contractor has been convicted of such a crime.</p> <p>5. The Central Repository for Nevada Records of Criminal History may impose a fee upon an agency or a facility that submits</p>	H152			

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H152	Continued From page 3 fingerprints pursuant to this section for the reasonable cost of the investigation. The agency or facility may recover from the employee or independent contractor not more than one-half of the fee imposed by the Central Repository. If the agency or facility requires the employee or independent contractor to pay for any part of the fee imposed by the Central Repository, it shall allow the employee or independent contractor to pay the amount through periodic payments. (Added to NRS by 1997, 442; A 1999, 1946 < http://www.leg.state.nv.us/Statutes/70th/Stats199912.html >; 2005, 2170 < http://www.leg.state.nv.us/Statutes/73rd/Stats200521.html >) Based on record review the agency failed to ensure that there was an FBI clearance letter for 1 of 10 employee files reviewed. (Employee #10). Severity: 2 Scope: 1	H152			
H153	449.782 Personnel Policies A home health agency shall establish written policies concerning the qualification, responsibilities and conditions of employment for each type of personnel, including licensure if required by law. The written policies must be reviewed as needed and made available to the members of the staff and the advisory groups. The personnel policies must provide for: 7. The annual testing of all employees who have contact with patients for tuberculosis pursuant to NAC 441A.375; and This Regulation is not met as evidenced by: NAC 441A.375	H153			

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H153	<p>Continued From page 4</p> <p>3. Before initial employment, a person employed in a medical facility, a facility for the dependent or a home for individual residential care shall have a:</p> <p>(a) Physical examination or certification from a licensed physician that the person is in a state of good health, is free from active tuberculosis and any other communicable disease in a contagious stage; and</p> <p>(b) Tuberculosis screening test within the preceding 12 months, including persons with a history of bacillus Calmette-Guerin (BCG) vaccination.</p> <p>If the employee has only completed the first step of a 2-step Mantoux tuberculin skin test within the preceding 12 months, then the second step of the 2-step Mantoux tuberculin skin test or other single-step tuberculosis screening test must be administered. A single annual tuberculosis screening test must be administered thereafter, unless the medical director of the facility or his designee or another licensed physician determines that the risk of exposure is appropriate for a lesser frequency of testing and documents that determination. The risk of exposure and corresponding frequency of examination must be determined by following the guidelines of the Centers for Disease Control and Prevention as adopted by reference in paragraph (h) of subsection 1 of NAC 441A.200.</p> <p>4. An employee with a documented history of a positive tuberculosis screening test is exempt from screening with skin tests or chest radiographs unless he develops symptoms suggestive of tuberculosis.</p> <p>5. A person who demonstrates a positive tuberculosis screening test administered pursuant to subsection 3 shall submit to a chest radiograph and medical evaluation for active tuberculosis.</p>	H153			

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H153	<p>Continued From page 5</p> <p>6. Counseling and preventive treatment must be offered to a person with a positive tuberculosis screening test in accordance with the guidelines of the Centers for Disease Control and Prevention as adopted by reference in paragraph (g) of subsection 1 of NAC 441A.200.</p> <p>7. A medical facility shall maintain surveillance of employees for the development of pulmonary symptoms. A person with a history of tuberculosis or a positive tuberculosis screening test shall report promptly to the infection control specialist, if any, or to the director or other person in charge of the medical facility if the medical facility has not designated an infection control specialist, when any pulmonary symptoms develop. If symptoms of tuberculosis are present, the employee shall be evaluated for tuberculosis.</p> <p>Based on record review and staff interview, the agency failed to meet the statutory requirement for tuberculin testing for 2 of 10 employees. (Employees #1 and #8)</p> <p>1. Employee #1's date of hire was 5/9/95, and was last tested for TB (tuberculosis) on 8/4/09 with a Quantiferon Gold test. She had not been re-tested since. Administrative staff (Employee #2) stated Employee #1 was over-due for testing.</p> <p>2. Employee #8's date of hire was 7/13/09, and had no evidence of any TB testing in his personnel file. Administrative staff (Employee #2) stated she believed Employee #1 had been tested but could not locate the documents.</p> <p>Severity: 2 Scope: 1</p>	H153			
H181	<p>449.794 Clinical Records</p> <p>1. Clinical records must be kept for all patients</p>	H181			

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H181	<p>Continued From page 6</p> <p>who are receiving services directly from a home health agency or by contract with other health agencies or therapists. The records must contain pertinent past and current medical, nursing, social and therapeutic data.</p> <p>This Regulation is not met as evidenced by: Based on clinical record review, review of agency policy and procedures, patient and staff interview, the agency failed to ensure pertinent medical data was kept current for 1 of 10 patients.</p> <p>Patient #1, who lived at a group care home started receiving care from the agency on 12/2/10. When interviewed during a home visit on 2/24/11, Patient #1 stated her medication regimen included Pravastatin (a cholesterol medicine) and vitamin D. Interview with the group care supervisor and review of group care client records revealed that the Pravastatin was ordered 12/6/10 and the vitamin D on 2/10/11. The visiting home health agency nurse (Employee #1) stated she was not aware of the medication changes. The group care supervisor stated she never bothers to inform agency staff of medication changes for any of her clients who are on home health care services, she stated "I just let my med tech's know".</p> <p>Agency policy and procedure last revised 3/1/06 titled "Administration of Medications: General Guidelines" revealed "be aware that the physician may give the patient/caregiver changes or updates in medications over the phone or during office visits - therefore it is important to assess what medications that the patient is taking each visit". Patient #1 had been visited by a nurse at least 15 times since 12/6/10 (the date of the first medication order change).</p> <p>Severity: 2 Scope: 1</p>	H181			

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H195	<p>449.800 Medical Orders</p> <p>2. Initial medical orders, renewals and changes of orders for skilled nursing and other therapeutic services submitted by telephone must be recorded before they are carried out All medical orders must bear the signature of the physician who initiated the order within 20 working days after receipt of the oral order. This Regulation is not met as evidenced by: Based on clinical record review and agency policy review, the agency failed to update physician's orders for 3 of 10 patients (Patients #2, #6 and #7)</p> <p>1. Record review revealed that on 2/4/11, Patient #2's was ordered occupational therapy (OT) , physical therapy (PT) , skilled nursing (SN) , home health aide (HHA) and medical social worker (MSW) evaluations and treatments. Frequentness orders were obtained for PT and OT after evaluations and MSW was discontinued after evaluation.</p> <p>Skilled nursing visits were made 1/26/11, 1/28/11, 2/3/11, 2/8/11, 2/15/11 without first obtaining frequency orders from a physician.</p> <p>Home health aide services were provided 1/27/11, 2/2/11, 2/4/11, 2/7/11, 2/11/11 and 2/14/11 without first obtaining frequency orders from a physician.</p> <p>2. Patient #6 had orders for OT - consult, evaluate and treat. There was no documented evidence that an OT evaluation had been done. Employee #2 stated this patient had refused OT but orders discontinuing OT were not obtained.</p> <p>3. On 2/3/11, Patient #7 was ordered MSW evaluate and treat. The evaluation was done on</p>	H195			

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H195	Continued From page 8 2/7/11 and the MSW visited again on 2/14/11 to treat without first obtaining frequency orders. Severity: 2 Scope: 2	H195			

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